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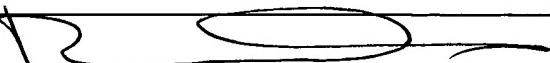
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TRANSMITTAL FORM		Application Number	09/827,472
		Filing Date	04/06/2001
		First Named Inventor	Tree
		Group Art Unit	
		Examiner Name	2859
Total Number of Pages in This Submission	8	Attorney Docket Number	Sony-03000

ENCLOSURES (check all that apply)

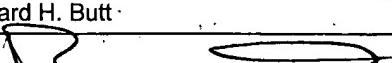
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Postcard	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Authorization from Mr. Lesher	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input checked="" type="checkbox"/> Limited Authorization from Mr. Lesher	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Authorization from Mr. Fujii	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/>	<input type="checkbox"/> Executed Declaration
<input checked="" type="checkbox"/> Revocation of Power of Attorney	<input type="checkbox"/>	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Power of Attorney with Change of Correspondence Address	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Statement Under 37 CFR 3.73(b) for Sony Electronics	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input checked="" type="checkbox"/> Statement Under 37 CFR 3.73(b) for Sony Corporation	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Copy of the Assignment	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks:	The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit overpayment to Deposit Account No: 50-1963. A duplicate copy of this authorization is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Richard H. Butt
Signature	
Date	9/30/2002

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